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CONFIRMATION NO. 4298

SERIAL NUMBER 10/024,778	FILING DATE 12/20/2001 RULE	CLASS 345	GROUP ART UNIT 2173	ATTORNEY DOCKET NO. US 010693
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None ✓

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

None ✓

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/23/2002

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	<i>✓</i>	NY	7	36	2

ADDRESS

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TITLE

Visual summary of audio-visual program features

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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